

GILA COUNTY VICTIM SERVICES EVALUATION SURVEY

Gila County is committed to providing excellent services to victims of crime. Because you were recently the victim of a crime, we would like to know how your experience was with Victim Services. Please take a few minutes to rate the following statements by marking the space that most closely matches your feelings. Your responses will help us serve you and other crime victims more effectively in the future.

1. What was the crime committed against you? _____
2. Were you contacted at least once by Victim Services after the initial contact (either by phone, in person or by mail)? ☐ YES ☐ NO
3. Did you receive an explanation of your rights regarding the criminal justice system (either by phone, in person or by mail)? ☐ YES ☐ NO
4. Did you receive notification of court proceedings throughout the court process (either by phone, in person or by mail)? ☐ YES ☐ NO
5. Did you *request* restitution or victim compensation assistance? ☐ YES ☐ NO
6. Did you *receive* restitution or victim compensation assistance? ☐ YES ☐ NO

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
7. I have an increased knowledge of services available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I have the information needed to make informed decisions about contacting other support services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. The assistance provided by Victim Services has increased my ability to cope.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. I have an increased knowledge of techniques used to cope with trauma and victimization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. The information and assistance provided had a positive impact on my participation in the criminal justice system.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. The assistance provided by Victim Services helped reduce my anxiety about participating in the criminal justice system.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I am satisfied with my level of participation in the criminal justice system.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. I have increased knowledge of the victim compensation program, restitution, and/or other financial assistance services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. I am better able to assess my safety needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. The assistance provided by Victim Services was helpful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Overall I am satisfied with the assistance I received from Victim Services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I would recommend Victim Services to other crime victims.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please feel free to add additional comments here:

Name (Optional) _____